FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

PURSUANT TO REGULATION D,
SECTION 4 (6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	13369	25			
	OMB A	Approval			
N	OMB Number:	3235-0076			
	Expires:	May 31, 2005			
	Estimated average burden				
	hours per respon	se16.00			

	SEC USE	ONLY
Prefix		Serial
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	DATE REC	CEIVED
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Private Placement	
Filing Under (check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6) ULOE	
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this an amendment and name has changed, and indicate change.)	05066085
Rocky Mountain Bankholdings, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2515 Foothill Boulevard, Rock Springs, WY 82901	(307) 362-1234
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(If different from Executive Offices)	PHOGESSEN
Brief Description of Business	
Bank Holding Company	B AUG 2 4 2005
	THURREDA
Type of Business Organization	FIMANCIA
corporation limited partnership, already formed other (please business trust limited partnership, to be formed	
Actual Date of Incorporation or Organization Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State; CN for Canada; FN for other foreign jurisdiction)	Year 8 5 Actual Estimated WY

GENERAL INSTRUCTIONS

Federal:

Who must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying of ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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1 of 9

A BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or	Managing Partner
Full Name (Last name first T. Coleman Andrews	, if individua	1)				
Business or Residence Add 2515 Foothill Boulevard, F			ate, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/o	r Managing Partner
Full Name (Last name first Matthew T. Ware	t, if individua	1)				
Business or Residence Add 2515 Foothill Boulevard, I	•		tate, Zip Code)	-		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or	Managing Partner
Full Name (Last name first Marc B. Wolpow	t, if individua	1)			·	
Business or Residence Add 2515 Foothill Boulevard, I	•		tate, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/o	r Managing Partner
Full Name (Last name firs Geoffrey S. Rehnert		<u> </u>				
Business or Residence Ad 2515 Foothill Boulevard, I	•		tate, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/	or Managing Partner
Full Name (Last name firs Laurence C. Fentriss	t, if individua	1)				
Business or Residence Ad 2515 Foothill Boulevard, I	•	-	tate, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/o	or Managing Partner
Full Name (Last name firs Kevin W. Wilson	t, if individua	1)				
Business or Residence Ad 2515 Foothill Boulevard, 1			tate, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/	or Managing Partner
Full Name (Last name firs	t, if individua	al)				
Business or Residence Ad	dress (Numbe	er and Street, City, S	tate, Zip Code)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

1.307		and and a	No.	B.INE	ORMATI	ON ABC	UTOFF	ERING	C. use	anta:		arilla en il
											Yes	No
l. Has t	the issuer s	old or doe	s the issuer	intend to	sell, to non	-accredite	d investors	in this off	ering?	••••••		
			Answ	er also in	Appendix,	Column 2	, if filing u	nder ULO	E			
2. Wha	t is the min	imum inv	estment tha	t will be a	ccepted fro	om any ind	ividual?	•••••	••••••		\$ 28,30	0
											Yes	No
3. Does	the offerin	ng permit j	oint owner	ship of a s	ingle unit?		**************	•••••••	***********	•••••		
simil an as or de infor	ar remuner sociated po aler. If mo mation foe	ration for serson or agore than five that broke	olicitation gent of a brove (5) person er or dealer	of purchas oker or dea ons to be li only.	sers in conr aler registe	nection wit red with th	h sales of s se SEC and	securities in Vor with a	n the offer state or sta	ing. If a jates, list the	any common person to be the name of y set forth to	e listed is the broker
ruii Nain	e (Last nai	ne iirsi, ii	individual)									
Business	or Residen	ice Addres	s (Number	and Street	t, City, Stat	te, Zip Cod	le)					
Name of	Associated	Broker or	Dealer	· · ·			·					
C+-+ : : :	Military Dan	T - 4 - 1	II C-1:-:		J- 4- C-1:	ala Danalar		-				
			Has Solici ndividual S		nas to Son	cit Purchas	sers			All States	.	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] (WY)	[PA] [PR]
			individual)				<u> </u>	1	<u> </u>		<u> </u>	
Business	or Resider	ice Addres	s (Number	and Street	t. City. Stat	te. Zip Cod	le)					
					.,							
Name of	Associated	l Broker of	r Dealer									
			Has Solici		nds to Soli	cit Purcha	sers					
(Check ". [AL]	All States" [AK]	or check in [AZ]	ndividual S [AR]	States) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	All States [GA]	s [HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	ie (Last na	me first, if	individual))								
Business	or Resider	nce Addres	s (Number	and Stree	t, City, Sta	te, Zip Coo	le)					
Name of	Associated	i Broker o	r Dealer		****	-1						
States in	Which De	son Listed	Has Solici	ted or Inte	ends to Soli	icit Purcha	cerc					
			individual S			utona				All State	es	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet or copy and use additional copies of this sheet, as necessary)

COEFERING PRICE, NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS.

1.	Enter the aggregate offering price of securities included in this offering and the total am Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, checindicate in the column below the amounts for exchange and already exchanged.	ount already sold. k this box and	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt Equity	\$ \$ 2,200,050	\$
	Common Preferred		
	Convertible Securities (including warrants) Partnership Interests Other (Specify	\$ \$ \$	\$ \$ \$
	Total	\$ _2,200,050_	\$1,882,850
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only)	21	\$1,882,850 \$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	Town	D.11
	Type of offering Rule 505 Regulation A Rule 504 Total	Type of Security	Dollar Amount Sold \$ \$ \$ \$ \$ \$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		\$
	Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (Specify finder's fees separately)		\$\$ \$\$ \$\$ \$\$
	Other Expenses (identify) Total		\$ \$ <u>22,650</u>

	COEFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE OF PRO	OCEEDS :
•	b. Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	е	\$1,860,200
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known furnish an estimate and check the box to the left of the estimate. The total of the payment listed must equal the adjusted gross proceeds to the issuer set forth in response to Part Question 4.b. above.	ı, s	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	\$	\$
	Purchase of real estate	\$	\$
	Purchase, rental or leasing and installation of machinery and equipment	\$	\$
	Construction or leasing of plant buildings and facilities	\$	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger	\$	\$
	Repayment of indebtedness	\$	\$
	Working capital	\$	1,860,200 \$
	Other (specify)	\$	·
		\$	\$
	Column Totals	\$	\$
	Total Payments Listed (column totals added)	\$_	1,860,200
N/-	D. FEDERAL SIGNATURE		
fol	ne issuer has duly caused this notice to be signed by the undersigned duly authorized personal llowing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and its staff, the information furnished by the issuer to any non-accredited investor pursuant to page	d Exchange Commissi	on, upon written request
_	suer (Print or Type) Signature	Date	
Ro	ocky Mountain Banholdings, Inc.	8-18-0	3
Na	ame of Signer (Print or Type) Title of Signer (Print or Type)		
M	atthew T. Ware		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

				GN				

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No
	provisions of such rule?		

See Appendix, column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

duly authorized person.	- Ma		
Issuer (Print or Type)	Signature	Date	
Rocky Mountain Bankholdings, Inc.		8-18-05	
Name (Print or Type)	Pitle (Print or Type)		
Matthew T. Ware	VP.		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice of Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2 3					4		5		
	Intend to non-accre investor State (Part B-It	edited rs in e	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
				Number of Accredited		Number of Nonaccreditd				
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
СО	•									
CT										
DE					. !					
DC										
FL										
GA										
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ME										
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MS	73									

1	2	2	3			5					
Ì									Disqualification		
ļ									State		
j	7	11 +-	Time of accumits	ļ							
ľ	Intend to		Type of security					ULOE (if yes, attach			
1	non-acc		and aggregate	1	T						
1	invest		offering price	ĺ		nvestor and			ation of		
	Sta		offered in state		amount pure	chased in State			granted)		
	(Part B-	Item I)	(Part C-Item 1)		(Part C	C-Item 2)		(Part E	-Item 1)		
ļ				Number of		Number of					
~ l		3.7		Accredited		Nonaccreditd		• •			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No		
МО						···					
MT											
NE											
NV											
NH											
NJ											
NM											
NY								-			
NC											
ND								 -			
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RI											
SC											
SD											
TN											
TX											
UT											
VT											
VA											
WA											
WV	i S										
WI	41										

APPENDIX

1	2 3			4				5	
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccreditd Investors	Amount	Yes	No
WY		X	Common Stock	21	1,882,850	0	0		X
PR								-	